

# CHAPTER ONE

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## Introduction

Canst thou not minister to a mind  
diseased;  
Pluck from the misery a rooted  
sorrow;  
Raze out the written troubles of the  
brain;  
And, with some sweet oblivious  
antidote  
Cleanse the stuffed bosom of that  
perilous stuff  
Which weighs upon the heart?

(Shakespeare, *Macbeth*)

During the period from 1816 to 1830, first at Heidelberg and later at Berlin, Hegel lectured regularly on the topic of madness or mental derangement (*Verrücktheit*). Unfortunately, the only remarks he published on this theme were contained in a mere two-page section of the highly condensed version of his lectures, the *Encyclopædia of the Philosophical Sciences* (published first in 1817, with subsequent editions in 1827 and 1830). This no doubt explains why virtually no notice was taken of Hegel's theory of madness by his contemporaries. One author, a physician writing of Hegel's general philosophy of medicine, lamented in 1829 that:

the system of Hegel, recently epoch-making in . . . North German scientific culture, and already applied in many ways to theology, jurisprudence, history in general, as well as to the history of philosophy especially and to aesthetics, has not been considered or noted by . . . physicians.<sup>1</sup>

In 1845, fourteen years after Hegel's death from cholera, one of Hegel's students, Ludwig Boumann,<sup>2</sup> published some thirty pages of *Zusätze*, or 'additions' to the *Encyclopædia* discussion of madness (HW 7: 198–228), based on Hegel's lecture manuscripts and the detailed notes Boumann and other students had taken on the lectures.<sup>3</sup> The expanded discussion presents not only Hegel's general theory of madness, but also a classificatory system, remarks on causation and therapy, numerous summaries of case histories, and comments on current debates and controversies within psychiatric medicine.

Even still, Hegel's ideas attracted almost no attention. Indeed, as Dietrich von Engelhardt notes, "in the comprehensive works on the history and systematics of the concept of illness, Hegel has not been included."<sup>4</sup> Similarly, Hegel remains conspicuously absent from the host of recently published works on the history of insanity beginning with those of Michel Foucault in the 1960s, including works which especially emphasize the importance of the period of the early nineteenth century.<sup>5</sup> And even within Hegel scholarship itself, very little notice has been given to Hegel's theory of madness.<sup>6</sup>

It may be that even the enlarged discussion of madness afforded by Boumann's additions has appeared too slim to merit much attention. Or perhaps the fact that Hegel situates his discussion within the "Anthropology" section of his *Encyclopædia* has led to its marginalization, given that anthropology for Hegel deals merely with the 'soul,' which has not yet developed into the truly 'spiritual' consciousness which preoccupies him in the main body of his philosophical project. Thus W. T. Stace can write that Hegel's remarks on insanity "appear to be parenthetical, and to have no connection with the course of the dialectic."<sup>7</sup> The fact that Hegel himself refers to madness in any explicit way only tangentially and in passing in his other writings would certainly appear to add weight to the attitude of neglect. But whatever the reasons for the inattention Hegel's theory of madness has suffered, a closer look is in order.

The *Encyclopædia* passages are in fact so suggestive that there are good reasons for according to insanity a much more important role within the larger scheme of Hegel's philosophy than the space he allots to it might suggest.<sup>8</sup> Most importantly, we may note Hegel's claim that "insanity [is] an essential . . . [and] necessarily occurring form or stage . . . in the development of the soul" (PM § 408 Z). His point, of course, is not that we are all inevitably destined to derangement, but rather that madness represents a

constantly threatening and yet seductive possibility prepared for by our encounter with the fundamentally alienating character of life. Further, like Freud some eighty years later, Hegel saw madness as a reversion to and recovery of psychic origins: in madness, the mind “sinks back” into the earliest phases of the development of the soul, the domain of the unconscious play of instincts, or what he calls “the life of feeling” (*Gefühlsleben*) (PM §§ 403–408). As such, the study of madness promises a privileged point of access to what we might call a primordial ontology, or an ontology of origins. Moreover, since Hegel believes that the “feeling soul” (*die fühlende Seele*) is never somehow overcome in the normal course of ego-development, but is retained and integrated within the rational self, this primordial ontology may also serve to illuminate the anatomy of the ‘normal’ (or as Hegel says, the ‘developed’ or ‘rational’) mind in new ways.

This last point is particularly important. One of the most fascinating aspects of Hegel’s theory of madness is that insanity and rationality are not in fact conceived of as opposites, but in important respects as kindred phenomena, sharing many of the same underlying structures, each illuminating their ‘other’ in significant ways. The healthy mind is still grappling with the same sorts of contradictions and feelings of alienation, the same “infinite pain” (PM § 382), which characterizes insanity. The fact that madness is the mirror of the developed consciousness—inverted and distorted in many respects, to be sure, incorporating the structures of rationality within a different construction of the relation between the self and its world—explains why Hegel views the surpassing of disease by health as always one which preserves within itself the possibility of a regression: “insanity is not a . . . loss of reason,” he says, “but only derangement, only a contradiction in a still subsisting reason,” so that madness has “the healthy . . . consciousness for its presupposition” (PM §§ 408 & Z).

Hegel believes that there are certain essential tensions—“contradictions” and “oppositions” as he calls them—inherent in madness which are “still preserved” and mirrored in the rational mind (PM § 408 Z): for example, the tensions between the unconscious and the conscious, between nature and spirit, and between the inner world of instinct and the outer world of ‘otherness’ which stands opposed to our desire. These oppositions are ineluctable features of all mind, and since they appear much more vividly in madness, a study of madness affords us with a particularly illuminating perspective from which to view the ‘normal.’ Darrel

Christensen goes so far as to say that "the phenomenology of the diseased mind is the same as the phenomenology of the normal mind," and that "the formal characteristics of mental diseases are the same as the formal characteristics of normal thought" except for the presence of "an archaic content" in madness.<sup>9</sup> Whether the phenomenological structures of mental health and illness are in fact essentially identical for Hegel will have to be explored in detail, but at the very least it is clear that they are intimately related. Just as Freud was later to take it as a first principle of his psychoanalytic theory that "in order to arrive at what is normal and apparently so simple, we shall have to study the pathological with its distortions and exaggerations,"<sup>10</sup> a close reading of Hegel's analysis of the diseased mind promises a fascinating entry to his phenomenology of rational consciousness.

With this suggestion in mind, it would be a mistake to see mastery and slavery, stoicism, skepticism, despair (the "unhappy consciousness"), the law of the heart, absolute freedom and terror, the beautiful soul—and many of the other forms of consciousness which together make up the gallery of the shapes of spirit in Hegel's *Phenomenology*—as ways of being which have no point of contact with his discussion of madness. It is true that he sees mental disease as a particular shape of mind which occurs at a level of life which is "immersed in nature" and hence is not fully spiritual, and which is surpassed by truly rational consciousness. This may be why there are so few references to insanity outside of Hegel's anthropology; the phenomenology of the developed consciousness will require a different vocabulary to describe its inner conflicts than the language appropriate to insanity, as the spheres of spirit and nature enclose importantly different forms of experience and theaters of action. But again, madness has the healthy consciousness as its 'presupposition,' and in rationality we can hear the echo of the language of madness, the vestige of our archaic past which we all retain within us, which allows us to uncover striking points of contact between madness and these other shapes of experience. Indeed, we will see that many of the portraits Hegel draws of particularly alienated forms of consciousness, where the inner turmoil of the rational mind forces consciousness to become radically decentered and dislocated, are so close to the portrait he gives of madness that the line of demarcation separating them becomes all but erased.

The relationship of mirroring between madness and the 'normal' mind allows for new perspectives not only on different

phenomenological shapes of consciousness, but on many other themes which are central to Hegel's larger philosophical project, ranging from the most central assumptions of his metaphysics to his philosophy of language, his aesthetics, his conception of the nature of history and time, his theories of labor, desire and human intentionality, and his reflections on poverty and social marginalization. The purpose of this book will be to explore these connections between Hegel's theory of insanity and other basic themes of his philosophy by situating his analysis of madness within several contexts: within the "Anthropology" discussion of the 'feeling soul,' where Hegel works out a sophisticated ontology of mental derangement; within the history of medical psychology during the great reform period of the turn of the eighteenth century when Hegel was writing; within a comparison to Hegel's phenomenology of the developed consciousness, where so many of the same mental and experiential structures as are found in madness reoccur; and within the broadest scope of Hegel's metaphysics, epistemology, aesthetics, and political philosophy, in order to exploit the promise of his theory of madness to reveal new perspectives on themes which are most central to his philosophic vision.

Chapter 2 will locate Hegel's theory of madness within the history of early nineteenth century philosophical and medical conceptions of insanity. This was a time of enormous upheaval in the social and medical perceptions of madness, and in the practices of classification, diagnosis, and treatment. We will look at some of the most important controversies of the period, most notably those between empirical and Romantic medicine and between 'somatic' and 'psychic' theories of mental illness, and show how Hegel's own 'speculative' theory of madness sought to fashion what he called a "middle path" between these contesting factions. We will introduce the primary elements of Hegel's ontology of madness as they emerge in his "Anthropology" discussion of 'the feeling soul,' and conclude with a look at his position on the early nineteenth century fascination of psychology with animal magnetism, or Mesmerism.

In chapter 3, the provisional sketch of Hegel's theory offered in the previous chapter will be fleshed out by examining in more detail such key ideas as regression, separation from reality, dream-consciousness, and the place of the unconscious in the economy of the instincts. These ideas will then be applied to an explicit comparison of the phenomenological structures of madness with those of the developed consciousness, centering on Hegel's account of stoicism, skepticism, and despair. Along the way, we will discuss the

relationship between Hegel's purely formal ontology of madness and his personal acquaintance with insanity through the illnesses of his sister Christiane and his close friend, the poet Friedrich Hölderlin. Finally, it will be argued that Hegel's conception of madness sheds new light on his commitment to an 'idealist' philosophy, since in important ways madness is diagnosed as a sort of failed idealism which by contrast helps to deepen our understanding of the values of Hegel's own philosophic system.

Chapter 4 will concentrate on Hegel's theory of desire, most particularly on that aspect of desire which is nostalgic and regressive, tempting consciousness to abandon its immersion in the everyday world and to "sink back," as Hegel puts it, to the archaic past of the soul. It is this nostalgic face of desire which plays for Hegel the same role as the concepts of regression and the death instinct would later for Freud, and we will explore this comparison in some detail. The chapter will close by examining Hegel's interpretation of the biblical story of the Fall, showing how his allegorical reading relies strongly on a conception of nostalgic desire which is central to his anatomy of the etiology of or 'fall' into madness.

Chapter 5 will expand on the theme of the unconscious in Hegel's account of madness, placing Hegel in dialogue with the later theories of Nietzsche and Freud, and focusing on such issues as the line of distinction between health and illness, the analogy of madness to dreaming, the nature of sublimation and repression, and the concept of insanity as a double personality. Chapter 6 will turn outwards, in a sense, moving away from the psychic unconscious to a consideration of Hegel's theory of conscious intentionality. The argument of the chapter, however, will be that even in the most intentional action, Hegel detects the crucial presence of what is unintended or hidden from conscious sight, so that at least in some sense the role of the unconscious remains important even in the course of our entirely 'normal' day-to-day experience. This theme will be investigated through an interpretation of several of the most important features of Hegel's theory of intentionality: his conception of the circular nature of action, his critique of anti-consequentialist ethical theories, his portrait of alienation, and his theory of language. The purpose of the chapter will be to draw some conclusions about just how much madness and the rational mind share with respect to the vicissitudes of the unconscious.

Our discussion will then turn, in chapter 7, to an examination of the connections between madness and tragedy. While these are not connections Hegel tends to draw himself, it will be argued that

his theory of tragedy reveals a form of action that in important respects exists very much on the borderline between health and illness. By existing in the between-space of sanity and madness, tragic action serves to highlight the overlapping structures of mental derangement and the developed, rational consciousness in a particularly forceful way. We will compare madness and tragedy as forms of acute alienation in response to the experience of what Hegel terms "the broken world," and as sharing an ontology of inward 'doubleness' or self-division which in turn entails a radical reorganization of the relation to the outer world. In addition, by looking at Hegel's readings of various Sophoclean tragedies, we will examine the close association between madness and tragic action in their struggles with guilt and evil, in their reliance upon the unconscious, and in their similar dislocations from historical time.

Finally, in chapter 8 we will consider the implications of an important, and in many ways puzzling, absence in Hegel's theory of madness: an account of the social, political, and historical contexts in which insanity becomes defined and managed. We will examine the ways in which Hegel's uncharacteristic silence on historical and cultural themes opens his discussion of madness to the critiques of two of the most important twentieth century writers on the history of psychiatry and the concept of mental illness: Michel Foucault and Thomas Szasz, who argue in different ways that madness is not in fact a medical phenomenon at all, but a phenomenon of social engineering, moral re-education, and the politically instigated labeling and 'correction' of behaviors viewed as threatening to the dominant order of society. We will look carefully at Hegel's reliance on the therapeutic theory and practice made famous by the French physician Philippe Pinel, who instituted what he called a 'moral therapy' in his directorship of the asylum of Bicêtre in Paris in the years following the French Revolution, and seek to resolve the extent to which Hegel's own understanding of moral therapy leaves him vulnerable to the sorts of attacks 'social labeling' theorists like Foucault and Szasz level against Pinel.

It will be argued that Hegel's ontology of madness would be importantly strengthened if it could be made compatible with a labeling perspective, so that insanity would be analyzed from a double point of view, as an actual medical phenomenon requiring an ontological description, but also as a phenomenon in part subject to cultural construction, requiring a description of the historically changing social and political contexts in which madness becomes

redefined. And it will be suggested that in fact there is a way of reconstructing Hegel's theory of madness so that such a reconciliation is possible, if we apply the analysis he develops in his political philosophy of poverty and destitution to his ontology of insanity. While this reconstruction would leave writers like Foucault and Szasz unsatisfied, given their uncompromising reduction of madness to a purely socially constituted phenomenon, it would not only preserve the subtlety and force of Hegel's ontology of madness, but would make it more in tune with such basic commitments of his larger philosophy as his theory of recognition—that self-identity is shaped in significant ways by how and what I am recognized as being—and his emphasis on historical and social reality as the context in which phenomenological structures of consciousness are made determinate and concrete.

The last thirty years have seen a steadily growing fascination with the study of madness and the institution of psychiatry on the part of sociologists, historians, legal scholars, philosophers, feminist theorists, and writers situating themselves in the terrain of post-modernism. Much of the interest has been spurred by a series of heretical anti-psychiatric writings which appeared in the 1960s—Foucault's *Madness and Civilization* and *The Birth of the Clinic*, Szasz's *The Myth of Mental Illness*, *Psychiatric Justice*, and *Law, Liberty, and Psychiatry*, R. D. Laing's *The Divided Self* and *The Politics of Experience*, David Cooper's *Dialectics of Liberation* and *Psychiatry and Anti-Psychiatry*, and Thomas Scheff's *Being Mentally Ill*—as well as by studies of psychiatric institutions such as Erving Goffman's *Asylums* and David Rothman's *Discovery of the Asylum*. There is now a huge literature on madness, perhaps particularly within the field of the sociology of medicine, but also including contributions by Marxists, Freudians and post-Freudian psychoanalytic theorists, civil libertarians, and philosophers from within both the analytic and continental traditions. In delving into Hegel's much-neglected theory of madness, we will gain not only some new perspectives on his own larger philosophy, but also prepare the way for a dialogue with this widespread contemporary interest in the theme of insanity and its social, medical, and philosophical history.